

	mark a series
ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mallplece, or on the front if space permits. Article Addressed to: 	A. Received by (Please Print Clearly) B. Date of Delivery C. Signature X MmP Mo A Agent Addressee D. Is delivery address different from item 1? Yes If YES, enter delivery address below:
Mr. Clifford Edey County Board of Supervisors 1108 Joshua Ave Parker AZ 85344	L-00000AA-01-0116 3. Service Type Certified Mail
2. Article Number (Copy from service label) 7099 3400 0018	469119030
ENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to:	A. Received by (Please Print Clearly) B. Date of Delivery C. Signature Quent Addressee D. Is delivery address different from item 11 (1988) If YES, enter delivery address below
Navajo Electric Coop PO Box 308 Lakeside AZ 85929	L-00000AA-01-0116 3. Service Type Certified Mail
2. Article Number (Copy from service label)	9750
S Form 3811, July 1999 Domestic Retu	urn Receipt 102595-00-M-0952
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. I. Article Addressed to:	A. Received by (Please Print Clearly) A. Received by (Please Print Clearly) B. Date of Delivery 7/2001 C. Signature Agent Addressee D. Is delivery address different from item 1? Yes If YES, enter delivery address below:
Citizens Utilities 2901 North Central Ave #160 Phoenix AZ 85012 2. Article Number (Copy from service label)	3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. Restricted Delivery? (Extra Fee) Yes

²S Form 3811, July 1999

Domestic Return Receipt

ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete	A Received by (Please Print Clearly) B. Date of Delivery
item 4 if Restricted Delivery is desired. Print your name and address on the reverse	Phillip Rodryuz 72001
so that we can return the card to you.	C. Signature
Attach this card to the back of the mailpiece,	X Addressee
or on the front if space permits.	D. Is delivery address different from item 1? Yes
Article Addressed to:	If YES, enter delivery address below: ☐ No
	L-00000AA-01-0116
ulphur Springs Valley Elec Coop	
O Box 820	3. Service Type X Certified Mail □ Express Mail
	Registered Return Receipt for Merchandise
Wilcox AZ 85644	☐ Insured Mail ☐ C.O.D.
	4. Restricted Delivery? (Extra Fee) ☐ Yes
Article Number (Copy from service label)	VO 09113
S Form 3811, July 1999 Domestic Re	eturn Receipt 102595-00-M-0952
	· · · · · · · · · · · · · · · · · · ·
ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete	A Received by (Please Print Clearly) B. Date of Delivery
item 4 if Restricted Delivery is desired.	JENNIFER & DEMP 7/20
Print your name and address on the reverse so that we can return the card to you.	C. Signature
Attach this card to the back of the mailpiece,	TX 44 CO O S Agent
or on the front if space permits.	Addressee
Article Addressed to:	D. is delivery address different from item 1?
Dave Shelton	L-00000AA-01-0116
Dave Shelton Town Manager	
Town Manager	L-00000AA-01-0116 3. Service Type Cortified Maii Express Mail
Town Manager 1314 11 th Street	3. Service Type
Town Manager 1314 11 th Street	3. Service Type X Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.
Town Manager 1314 11 th Street Parker AZ 85344	3. Service Type Certified Mail
Fown Manager 1314 11 th Street Parker AZ 85344	3. Service Type X Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.
Town Manager 1314 11 th Street Parker AZ 85344 Article Number (Copy from service label)	3. Service Type X Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.
Town Manager 1314 11 th Street Parker AZ 85344 Article Number (Copy from service label) 70993400008 S Form 3811, July 1999 Domestic R	3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes
Town Manager 1314 11 th Street Parker AZ 85344 Article Number (Copy from service label) TO 90 3 400 008 S Form 3811, July 1999 Domestic R	3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes Complete This Section on Delivery
Town Manager 1314 11 th Street Parker AZ 85344 Article Number (Copy from service label) 70993400008 S Form 3811, July 1999 Domestic R	3. Service Type Certified Mail
Town Manager 1314 11 th Street Parker AZ 85344 Article Number (Copy from service label) TO 90 3 400 000 0000 S Form 3811, July 1999 Domestic R ENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse	3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes Complete This Section on Delivery A. Received by (Please Print Clearly) B. Date of Delivery Complete This Section On Delivery Complete This Secti
Town Manager 1314 11 th Street Parker AZ 85344 Article Number (Copy from service label) S Form 3811, July 1999 Domestic R ENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you.	3. Service Type Certified Mail
Article Number (Copy from service label) Article Number (Copy from service label) Form 3811, July 1999 Domestic R ENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse	3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes Complete This Section on Delivery A. Received by (Please Print Clearly) B. Date of Delivery C. Signature Agent Addressee
Town Manager 1314 11 th Street Parker AZ 85344 Article Number (Copy from service label) S Form 3811, July 1999 Domestic R ENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece,	3. Service Type Certified Mail
Town Manager 1314 11 th Street Parker AZ 85344 Article Number (Copy from service label) S Form 3811, July 1999 Domestic R ENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.	3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes Seturn Receipt 102595-00-M-0952 COMPLETE THIS SECTION ON DELIVERY A. Received by (Please Print Clearly) B. Date of Delivery C. Signature Agent Addressee Addressee D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
Town Manager 1314 11 th Street Parker AZ 85344 Article Number (Copy from service label) S Form 3811, July 1999 Domestic R ENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.	3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes Seturn Receipt 102595-00-M-0952 COMPLETE THIS SECTION ON DELIVERY A. Received by (Please Print Clearly) B. Date of Delivery C. Signature Agent Addressee Addressee D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
Town Manager 1314 11 th Street Parker AZ 85344 Article Number (Copy from service label) S Form 3811, July 1999 Domestic R ENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to:	3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes Complete This Section on Delivery A. Received by (Please Print Clearly) B. Date of Delivery C. Signature Agent Addressee Addressee D. Is delivery address different from item 1? Yes
Town Manager 1314 11 th Street Parker AZ 85344 Article Number (Copy from service label) TO99 3400 008 S Form 3811, July 1999 Domestic R ENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to:	3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes Seturn Receipt 102595-00-M-0952 COMPLETE THIS SECTION ON DELIVERY A. Received by (Please Print Clearly) B. Date of Delivery Agent Addressee X
Town Manager 1314 11 th Street Parker AZ 85344 Article Number (Copy from service label) TO90 3400 008 S Form 3811, July 1999 Domestic R ENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to:	3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes Seturn Receipt 102595-00-M-0952 COMPLETE THIS SECTION ON DELIVERY A. Received by (Please Print Clearly) B. Date of Delivery Agent Addressee X
Town Manager 1314 11 th Street Parker AZ 85344 Article Number (Copy from service label) TO90 3400 008 S Form 3811, July 1999 Domestic R ENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to:	3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes Complete This Section on Delivery A. Received by (Please Print Clearly) B. Date of Delivery A. Received by (Please Print Clearly) B. Date of Delivery Addressee Addressee Addressee D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No No No No No No No N
Town Manager 1314 11 th Street Parker AZ 85344 Article Number (Copy from service label) TO 90 3 400 008 S Form 3811, July 1999 Domestic R ENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to:	3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes Seturn Receipt 102595-00-M-0952 COMPLETE THIS SECTION ON DELIVERY A. Received by (Please Print Clearly) B. Date of Delivery Agent Addressee C. Signature Agent Addressee D. Is delivery address different from item 1? Yes Yes If YES, enter delivery address below: No No No No No No No No

S Form 3811, July 1999

Domestic Return Receipt

	en e
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	* Received by (Please Print Clearly) B—Pare of Delivery C. Signature Agent Addressee
. Article Addressed to:	D. Is delivery address different from item 1?
Arizona Reporting Service, Inc. 2627 N Third St, Suite 3	L-00000AA-01-0116
Phoenix AZ 85004-1103	3. Service Type SQ. Certified Mail
Article Number (Copy from service label) 7099 3400 0018	2489 8866
vrm 3811, July 1999 Domestic Re	turn Receipt 102595-00-M-0952
ENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.	A. Received by (Please Print Clearly) C. Signature Addressee
Article Addressed to:	D is delivery address different from item 1? If YES, enter delivery address below: No
Terry Hooper Town Manager	L-00000AA-01-0116
1314 11 th Street Parker AZ 85344	3. Service Type ★ Certified Mail
2. Article Number (Copy from service label)	4. Resultied Dailys (Land 700)
7099 3400 0018 89	99 102595-00-M-0952
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you.	A Received by (Please Print Clearly) DIANE OF LYDD 7-20-21 C. Signature
Attach this card to the back of the mailpiece, or on the front if space permits.	D. Is delivery address different from item 1? Yes
Mr. Eugene M. Fisher	If YES, enter delivery address below: No
County Board of Supervisors	
108 Joshua Ave Parker AZ 85344	3. Service Type X Certified Mail
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Copy from service label) 709 3400 0018 34	4. Hestricted Delivery? (EXTRA Fee) LI Yes

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
■ Complete items 1, 2, and 3. Also complete	A. Received by (Please Print Clearly) B. Date of Delivery
item 4 if Restricted Delivery is desired. Print your name and address on the reverse	SENDIFER DUSP 1100
so that we can return the card to you.	C. Signature
Attach this card to the back of the mailpiece, or on the front if space permits.	X Addressee
Article Addressed to:	D. Is delivery address different from item 1?
1. Article Addressed to.	₩YES, enter delivery address below: ☐ No
im Swaffer	1.0000
	L-00000AA-01-0116
Fown Manager	3. Service Type
1314 11 th Street	Certified Mail
Parker AZ 85344	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
	4. Restricted Delivery? (Extra Fee)
	T. Heathcled Delivery: (Exhaut 60)
2. Article Number (Copy from service label)	1499 T T S Q K 1
<u> </u>	eturn Receipt 102595-00-M-0952
Domestic No.	102030-00-W-0302
ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	A. Received by (Please Print Clearly)
Print your name and address on the reverse so that we can return the card to you.	C. Signature
Attach this card to the back of the mailpiece,	X % S 1 Agent
or on the front if space permits.	D. Is delivery address different from item 1? Yes
. Article Addressed to:	If YES, enter delivery address below:
Enron Energy	L-00000AA-01-0116
1742 North 24th Street #165	
Phoenix AZ 85016	3. Service Type A Certified Mail Express Mail
	☐ Registered ☐ Return Receipt for Merchandise
	☐ Insured Mail ☐ C.O.D.
	4. Restricted Delivery? (Extra Fee) Yes
Article Number (Copy from service label)	7018 181
S Form 3811, July 1999 Domestic Ref	turn Receipt 102595-00-M-0952
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 	A. Received by (Please Print Clearly) B. Data of Delivery
Print your name and address on the reverse	C. Signature
so that we can return the card to you. Attach this card to the back of the mailplece,	Adent
or on the front if space permits.	X Sue Firmanian to Addressee
. Article Addressed to:	D. Is delivery address different from Item 18
	ii i LO, entel delivery address below:
Mr. Michael M Grant	L-00000AA-01-0116
Gallagher & Kennedy	
2575 E Camelback Rd	3. Service Type
Phoenix AZ 85016-9225	Certified Mall
	Registered Receipt for Merchandise Insured Mail C.O.D.
	4. Restricted Delivery? (Extra Fee)
. Article Number (Copy from service label)	
8100 0018 PPOT	2489 9047
<u></u>	

'S Form 3811, July 1999

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	A Received by (Please Print Clearly) B. Date of Delivery
Print your name and address on the reverse	JENNIFER ISLUA Tholor
so that we can return the card to you.	C. Signature
Attach this card to the back of the mailpiece, or on the front if space permits.	Addressee
Article Addressed to:	D. (s delivery address different from item 1?
, , , , , , , , , , , , , , , , , , ,	If YES, enter delivery address below: No
7	L-00000AA-01 0116
Scott Ruby – Attorney	
1314 11 th Street	3. Service Type
Parker, AZ 85344	☑ Certified Mail ☐ Express Mail
	☐ Registered ☐ Return Receipt for Merchandise
en e	☐ Insured Mail ☐ C.O.D.
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Copy from service label)	7992 9946 8
'S Form 3811, July 1999 Domestic Re	eturn Receipt 102595-00-M-0952
ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete	A. Received by (Please Print Clearly) B. Date of Delivery
item 4 if Restricted Delivery is desired. Print your name and address on the reverse	Jennier Deut 720/0
so that we can return the card to you.	C. Signature
Attach this card to the back of the mailpiece,	Ø AUW DO DO DE Addressee
or on the front if space permits.	D. //s delivery address different from item 1?
Article Addressed to:	If YES, enter delivery address below: ☐ No
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	L-00000AA-01-0116
'aul Langseth	L-00000AA-01-0110
Town Manager	3. Service Type
314 11 th Street	Certified Mail
'arker AZ 85344	Registered Return Receipt for Merchandise
arker AZ 65344	☐ Insured Mail ☐ C.O.D.
	4. Restricted Delivery? (Extra Fee) Yes
Article Number (Copy from service label)	21/00/00/00
1044 3400 CO18	10484 BAO3
S Form 3811, July 1999 Domestic Ref	turn Receipt 102595-00-M-0952
ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete	A. Received by (Please Print Clearly) B. Date of Delivery,
item 4 if Restricted Delivery is desired.	E LeSyeul 7/20/01
Print your name and address on the reverse so that we can return the card to you.	C. Signature
Attach this card to the back of the mailpiece,	X F. 117111 Agent
or on the front if space permits.	D. Is delivery address different from item 1? Yes
Article Addressed to:	If YES, enter delivery address below:
	L 00000AA 04 044C
Mr. Randall L Simpson	L-00000A^-01-0116
VII. Kalluan L Dimpoor	
URS Corporation	3. Service Type
7720 N 16 th St, Suite 100	Certified Mail
Phoenix AZ 85020	Registered Return Receipt for Merchandise
	I □ Insured Mail □ C.O.D.
	☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes
Article Number (Copy from service label)	· · · · · · · · · · · · · · · · · · ·

5 Form 3811, July 1999

Domestic Return Receipt

ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete	A, Received by (Please Print Clearly) B. Date of Delivery
item 4 if Restricted Delivery is desired. Print your name and address on the reverse	JENNIFÉR É DELOP 1 1720
so that we can return the card to you.	C. Signature
Attach this card to the back of the mailpiece, (Addressee Addressee
or on the front if space permits.	D. Is delivery/address different from item 1? Yes
Article Addressed to:	If YES, enter delivery address below:
	
Mr. Greg Lucero	1-0000044 04 0440
Town Manager	L-00000AA-01-0116
314 11 th Street	3. Service Type
Parker AZ 85344	Certified Mail
	☐ Insured Mail ☐ C.O.D.
	4. Restricted Delivery? (Extra Fee)
Article Number (Conv. from convice label)	
Article Number (Copy from service label)	MUCO QANA
Form 3811, July 1999 Domestic F	Return Receipt 102595-00-M-0952
John Go i i, daly 1999 Domestic i	102030-00-M-0232
The state of the s	The state of the s
ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete	A. Received by (Please Print Clearly) B. Date of Delivery
item 4 if Restricted Delivery is desired.	TREJENNIGER DELLAP 3 TREGOI
Print your name and address on the reverse so that we can return the card to you.	/q. Signature
Attach this card to the back of the mallpiece,	Agent Agent
or on the front if space permits.	D is delivery address different from from 1? Yes
Article Addressed to:	D. Is delivery address different from 16m 1? U Yes If YES, enter delivery address below: U No
•	NO EG, GINER GENVERY AUGIESES SOLOW.
An Compliant	L-00000AA-01-0116
Ms. Carol McLeroy	1-0116
Town Clerk	3. Service Type
314 11 th Street	Certified Mail Express Mail
	·· _
314 11 th Street	Certifled Mall
314 11 th Street Parker, AZ 85344	Certified Mail Registered Express Mail Receipt for Merchandise
314 11 th Street	Certifled Mall
314 11 th Street Parker, AZ 85344 Article Number (Copy from service label)	Certified Mall
314 11 th Street arker, AZ 85344 Article Number (Copy from service label)	Certifled Mall Registered Return Receipt for Merchandise C.O.D.
314 11 th Street Parker, AZ 85344 Article Number (Copy from service label)	Certified Mall
314 11 th Street arker, AZ 85344 Article Number (Copy from service label) 7099 3000 Domestic I	Certified Mall
314 11 th Street Parker, AZ 85344 Article Number (Copy from service label) TO 99 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Certified Mall Express Mall Registered Return Receipt for Merchandlse Insured Mall C.O.D.
Article Number (Copy from service label) Article Number (Copy from service label) Form 3811, July 1999 Domestic I ENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	Certified Mall
Article Number (Copy from service label) Article Number (Copy from service label) Form 3811, July 1999 Domestic I ENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse	Return Receipt COMPLETE THIS SECTION ON DELIVERY A. Received by (Please Print Clearly) Certified Mall Return Receipt Express Mall Return Receipt for Merchandise C.O.D. Yes 102595-00-M-0952 COMPLETE THIS SECTION ON DELIVERY A. Received by (Please Print Clearly) B. Date of Delivery
Article Number (Copy from service label) Article Number (Copy from service label) Form 3811, July 1999 Domestic I ENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you.	Certified Mall
Article Number (Copy from service label) Article Number (Copy from service label) Form 3811, July 1999 Domestic I ENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse	Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.
Article Number (Copy from service label) Article Number (Copy from service label) Form 3811, July 1999 Domestic I ENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece,	Certified Mail
Article Number (Copy from service label) Article Number (Copy from service label) Form 3811, July 1999 Domestic I ENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.	Certified Mall
Article Number (Copy from service label) Article Number (Copy from service label) Form 3811, July 1999 Domestic I ENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.	Certified Mail
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Article Number (Copy from service label) Article Number (Copy from service label) Form 3811, July 1999 Domestic I ENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.	Return Receipt Receipt for Merchandise Restricted Delivery? (Extra Fee) Yes Restricted Delivery? (Extra Fee) Yes Return Receipt 102595-00-M-0952 Return Receipt Receipt 102595-00-M-0952 COMPLETE THIS SECTION ON DELIVERY Received by (Please Print Clearly) Received by (Please Print Clearly) Received Delivery Received Delivery
Article Number (Copy from service label) Article Number (Copy from service label) Form 3811, July 1999 Domestic I ENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: The Honorable Ken Keene 1314 11 th Street	Certified Mall Express Mall Registered Return Receipt for Merchandlse Insured Mall C.O.D.
Article Number (Copy from service label) Article Number (Copy from service label) Form 3811, July 1999 Domestic I ENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: The Honorable Ken Keene 1314 11 th Street	Return Receipt Restricted Delivery? (Extra Fee) Yes A. Restricted Delivery? (Extra Fee) Yes COMPLETE THIS SECTION ON DELIVERY A. Received by (Please Print Clearly) B. Date of Delivery C. Signature D. Le delivery address different from item 1? Yes If YES, enter delivery address below: No Addressee No L-00000AA-01-0116
Article Number (Copy from service label) Article Number (Copy from service label) Form 3811, July 1999 Domestic I ENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to:	Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.

S Form 3811, July 1999

Domestic Return Receipt

ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete	A. Received by (Please Print Clearly) B. Date of Delivery
item 4 if Restricted Delivery is desired.	PAMELA STARR 7 2001
Print your name and address on the reverse	C/Signature
so that we can return the card to you. Attach this card to the back of the mailpiece.	☐ Agent
or on the front if space permits.	Addressee
Article Addressed to:	D. Is delivery address different from item 1?
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Clerk of the Court	
Ms. Sheri Newman	L-00000AA-01-0116
316 Kofa Ave.	3. Service Type
Parker, AZ 85344	Certified Mail Express Mail
arker, -	☐ Registered ☐ Return Receipt for Merchandise
	☐ Insured Mail ☐ C.O.D.
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NDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
	A. Received by (Please Print Clearly) B. Date of Delivery
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As. Joyce Barker – Chairman	L-00000AA-01-0116
As. Joyce Barker – Chairman	L-00000AA-01-0116
County Board of Supervisors	L-00000AA-01-0116 3. Service Type
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County Board of Supervisors 108 Joshua Ave	3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandise
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Rendanlinding to katal take the traditional militarial 988244009F Phoenix, Arizona 85007-2996 W. Washington - Hrg. Div./Docket MOISSION COMMISSION r: Please prince name, address, and ZIP+4 in this box Permit No. G-10 Postage & Fees Paid USPS First-Class Mail UNITED STATES POSTAL SERVICE COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete A. Received by (Please Print Clearly) B. Date of Delivery item 4 if Restricted Delivery is desired. 7-20-01 Print your name and address on the reverse C. Signature so that we can return the card to you. ☐ Agent Attach this card to the back of the mailpiece, ☐ Addressee or on the front if space permits. D. Is delivery address different from item. I. Article Addressed to: If YES, enter delivery address below: Eastern Competitive Solutions L-00000AA-01-0116 **Coute 4 Box 1803** 3. Service Type _akeside AZ 85929 Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes Article Number (Copy from service label) S Form 3811, July 1999